



Armed Forces College of Medicine AFCM





Respiratory System

Gas Exchange

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By the end of this lecture the student will be able to:

1. Define **gas diffusion**.
2. Describe what is the **partial pressure of a gas** (PO_2 & PCO_2 in the body).
3. List the **factors affecting gas diffusion** between alveolar air and capillary blood.
4. Describe the **diffusing capacity of a gas**.
5. Compare between **perfusion and diffusion limitations** to gas exchange.



Gas Exchange



- Site:

- ***At the lungs**

- (between pulmonary capillary blood & alveolar air)

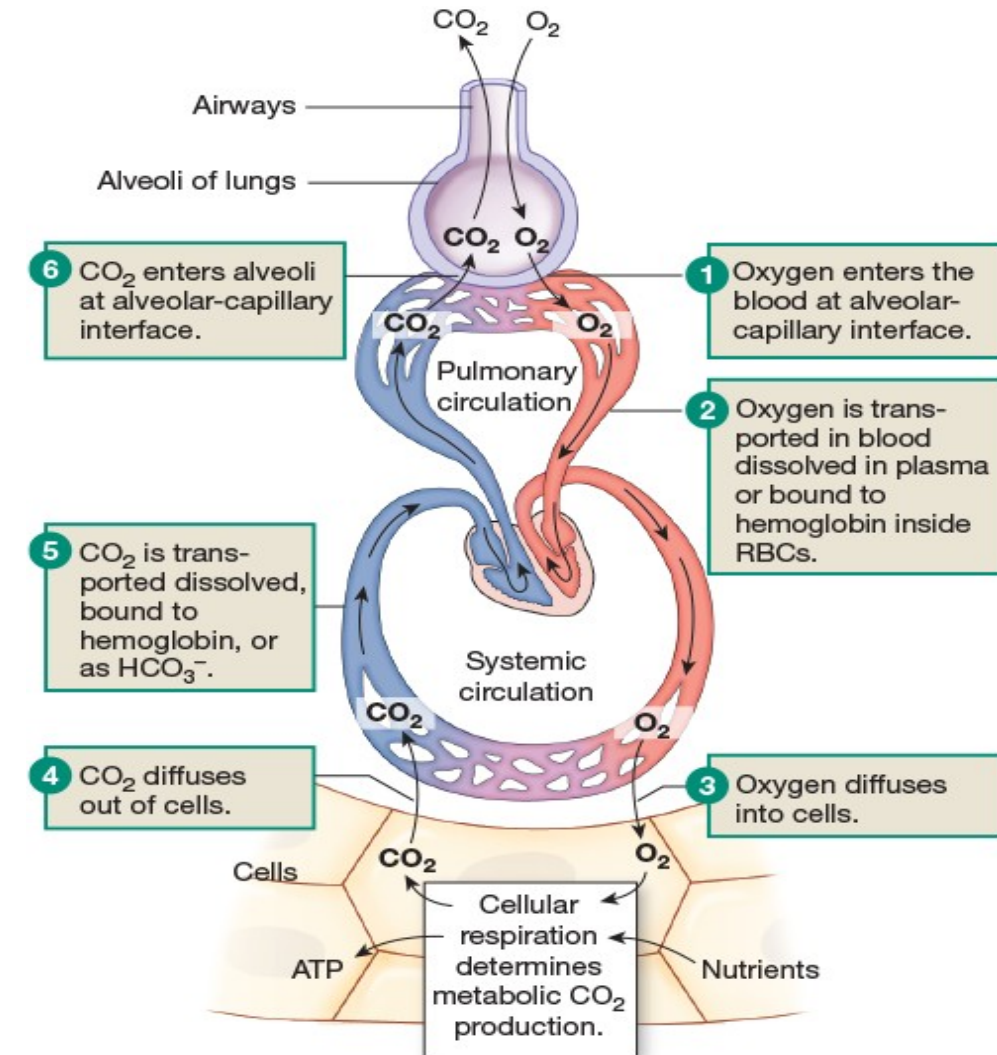
- ***At the tissues**

- (between systemic capillary blood & tissues)

- Mechanism:

Simple **Passive** Diffusion

down partial pressure gradient (from high to low partial pressure).



Gas Diffusion



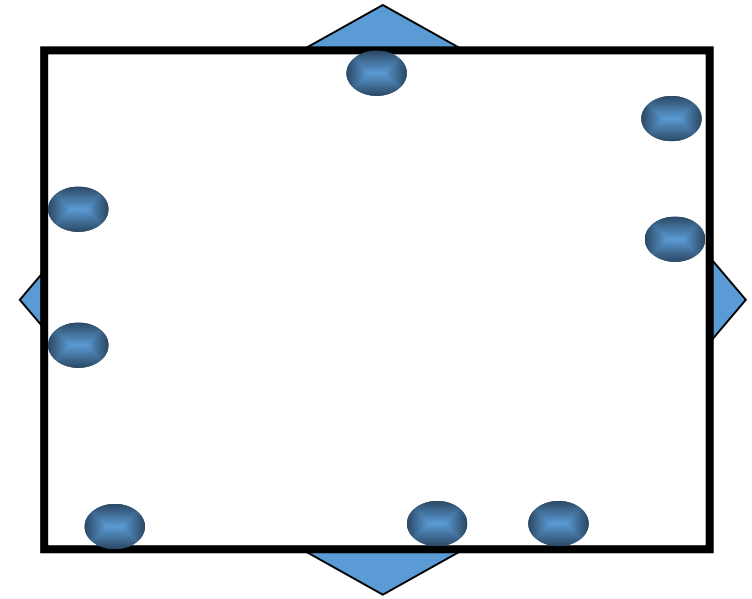
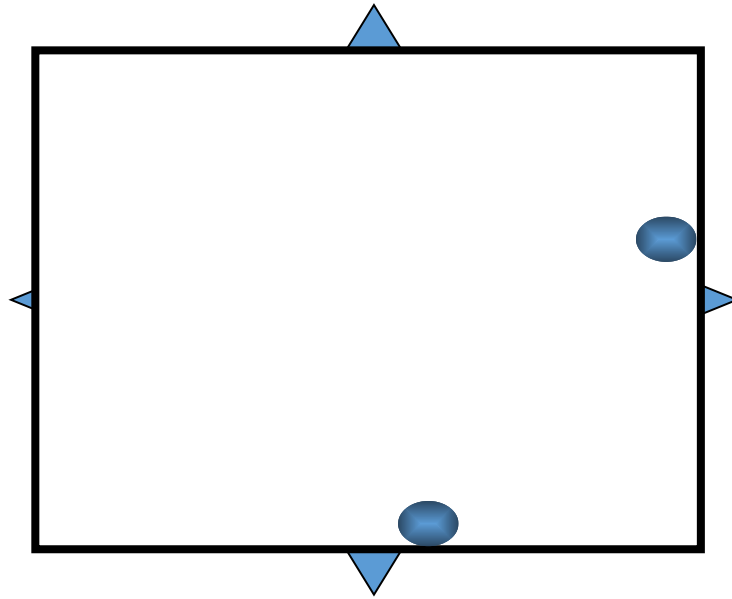
•Definition:

Is a net movement of gas molecules from area of high concentration (high partial pressure) to area of low concentration (low partial pressure).

•Factors affecting:

- 1- Concentration (partial pressure) gradient of the gas
- 2- Molecular weight of the gas
- 3- Solubility of the gas
- 4- Temperature
- 5- Surface area of the membrane
- 6- Thickness of the membrane





Dalton's Law:

Partial pressure = Total pressure × Fractional gas concentration

**HIGHER
PRESSURE**

Partial pressure of a gas:

- It is the pressure exerted by this gas when present in a gas mixture.
- It is a measure of gas concentration.

The higher the concentration of dissolved gas, the higher the pressure.

Partial pressure of a gas in blood depends on its physically dissolved form???



Gas exchange at lung level:



* Venous blood enters pulmonary capillaries:

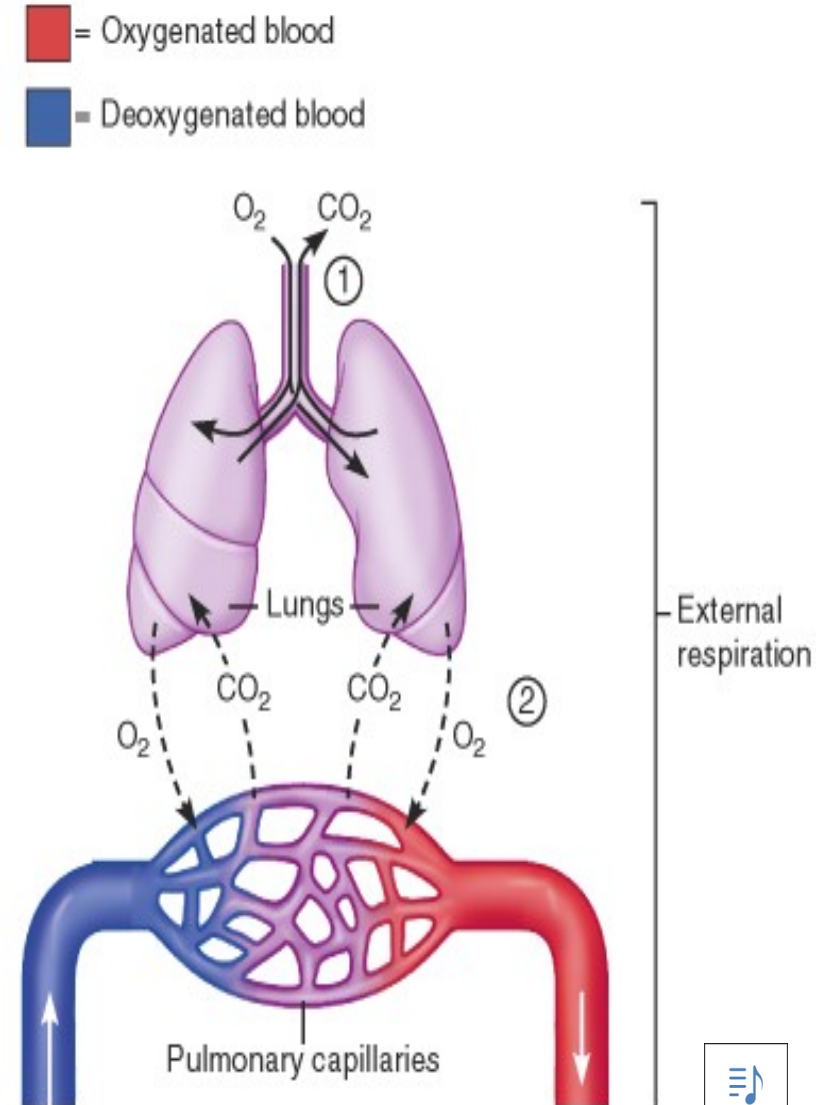
High PCO_2 & Low PO_2

* Air enters alveoli:

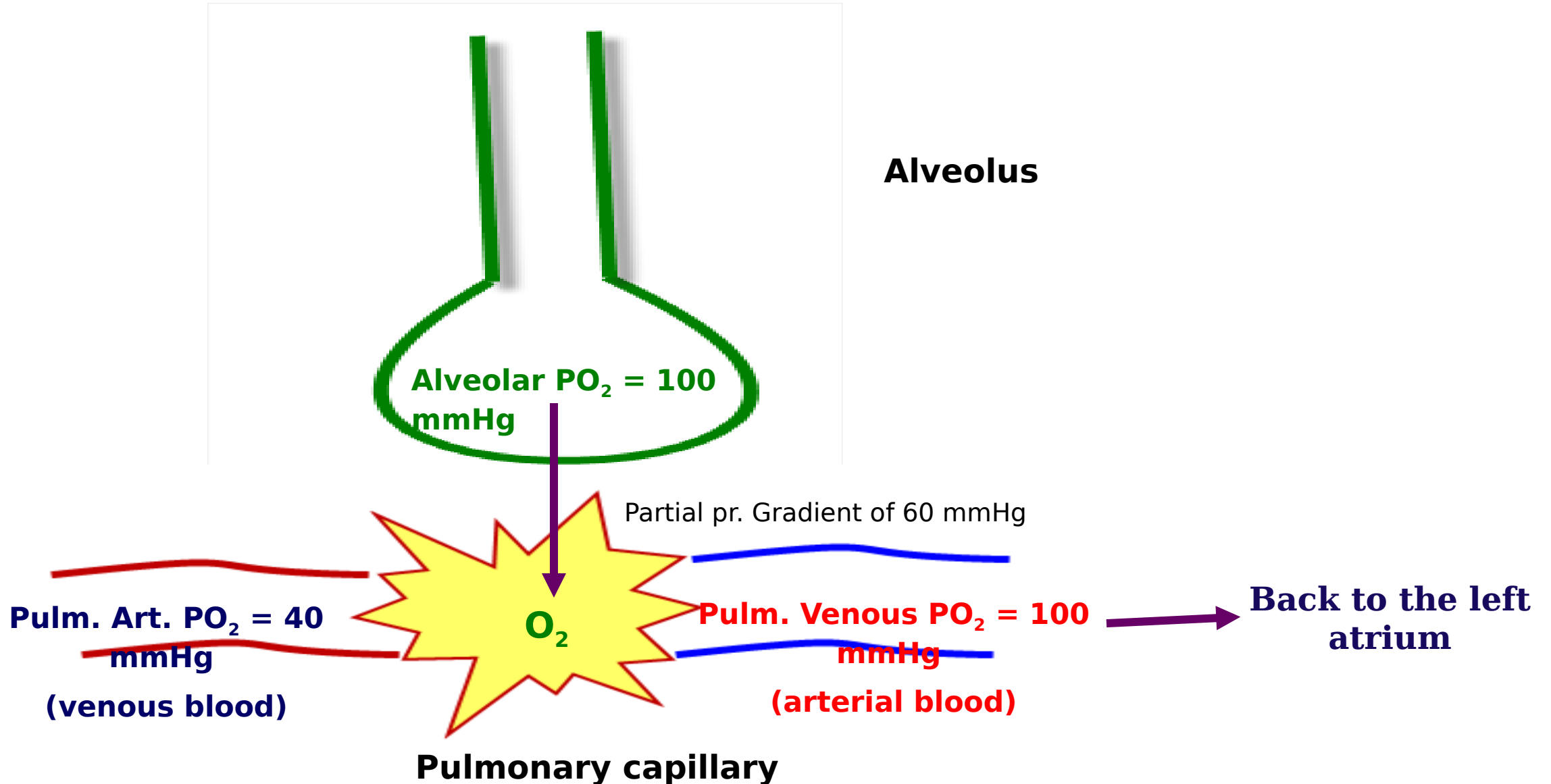
High PO_2 & Low PCO_2

✓ O_2 diffuses from alveoli to blood down its partial pressure gradient.

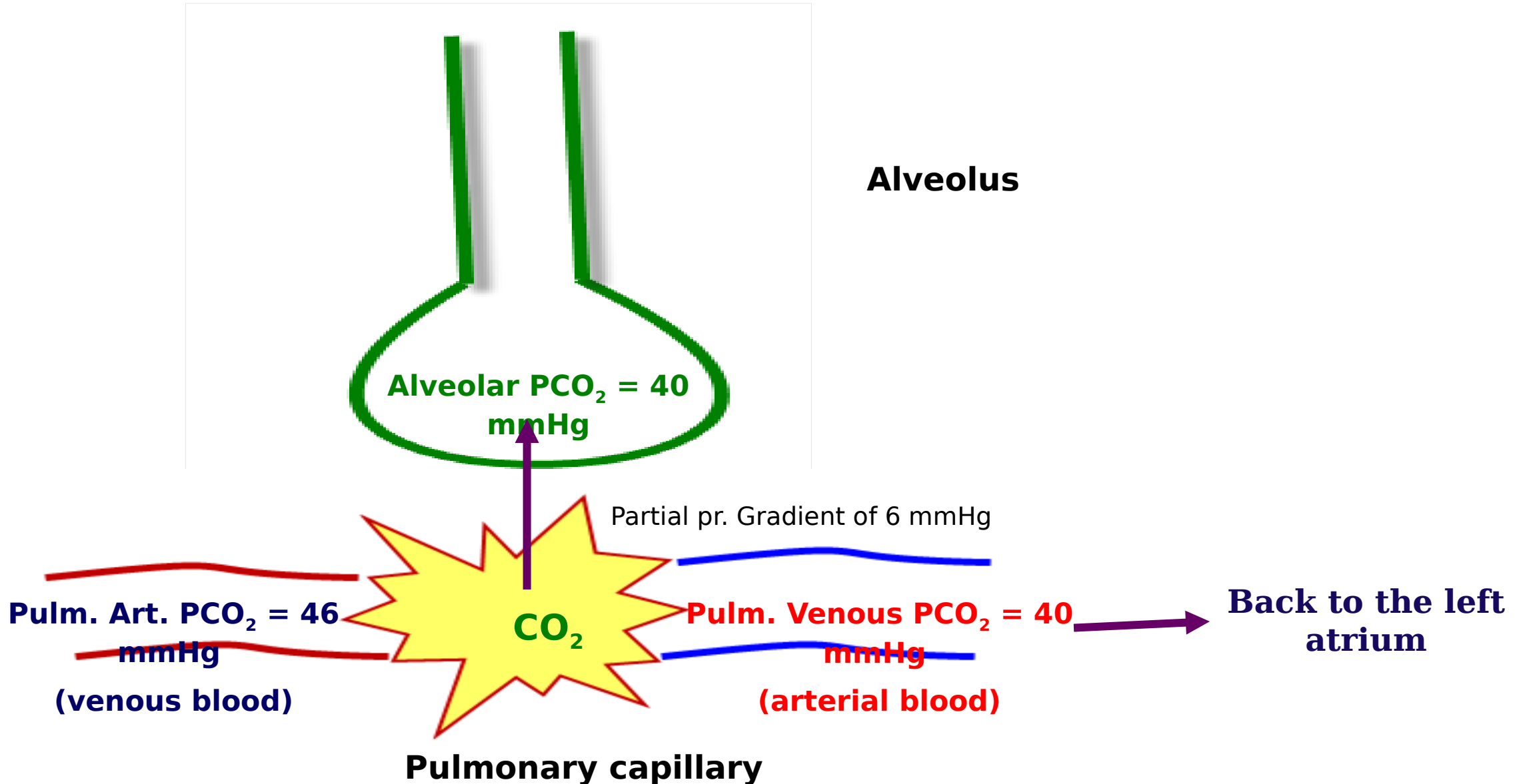
✓ CO_2 diffuses from blood to alveoli down its partial pressure gradient.



O₂ diffusion



CO₂ diffusion

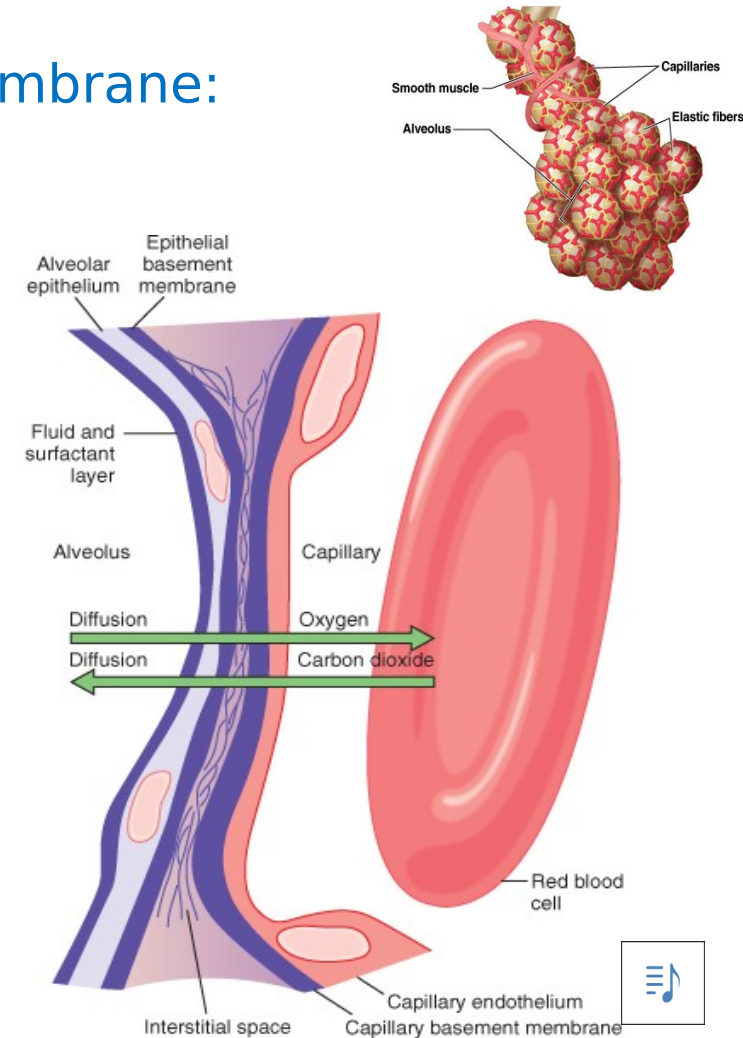


Alveolar-Capillary membrane (Respiratory membrane)



* In the lung, gas diffusion occurs through the alveolo-capillary membrane:

- ❑ Thickness: 0.5 to 1 μm .
- ❑ Total surface area: 70 m^2
- ❑ Formed of the following layers:
 - 1) Fluid lining alveolus containing surfactant.
 - 2) Alveolar epithelium.
 - 3) Epithelial basement membrane.
 - 4) Interstitial space.
 - 5) Capillary basement membrane.
 - 6) Capillary endothelium.



Factors affecting gas diffusion:



Gas

P

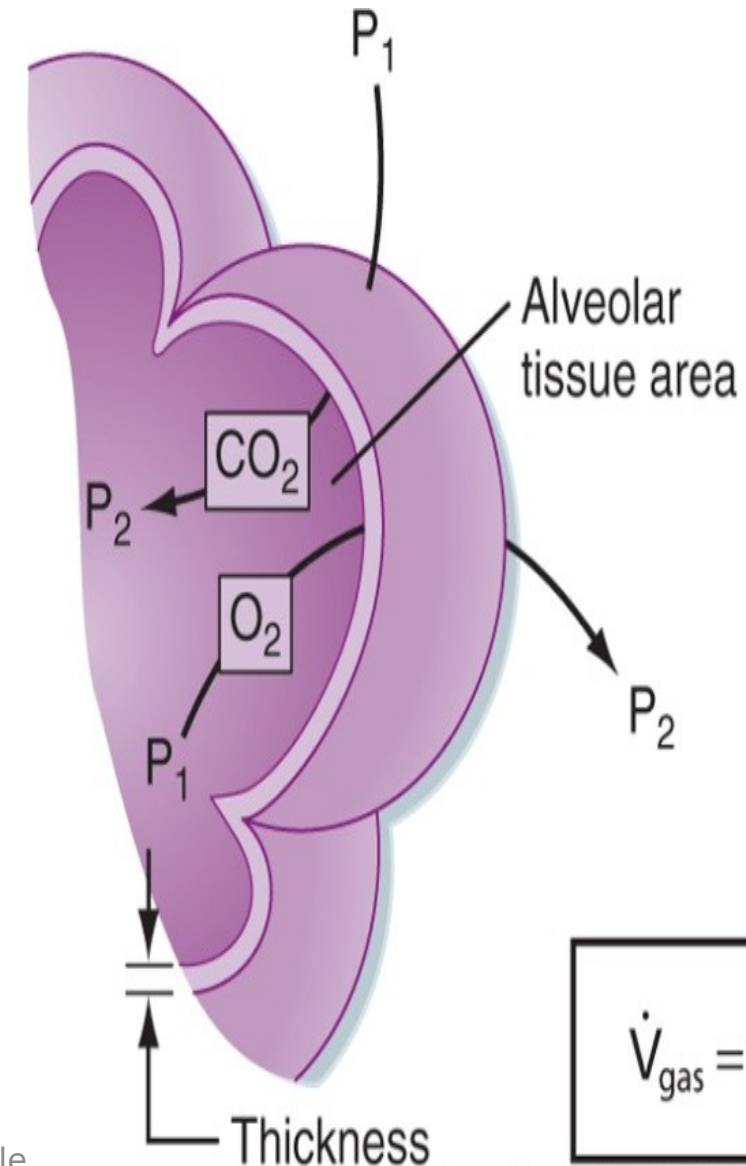
MW

Solubility

Alveolar-capillary membrane

Surface area

Thickness



$$\dot{V}_{\text{gas}} = A \times D \times \frac{P_1 - P_2}{T}$$

Rate of gas diffusion \propto



Partial Pressure gradient X Surface area of the membrane X Diffusion coefficient

Thickness of the membrane

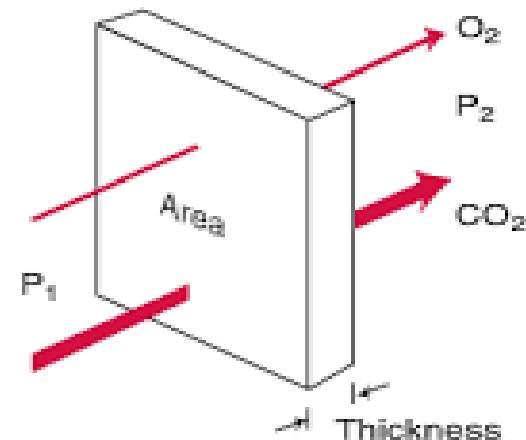
***The volume of gas transfer across the alveolar-capillary membrane per unit time is:

Directly proportional to:

- The difference in the partial pressure of gas betw
- The surface area of the membrane.
- The solubility of the gas.

Inversely proportional to:

- Thickness of the membrane.
- Molecular weight of the gas.



$$\dot{V}_{\text{gas}} \propto \frac{A}{T} \cdot D \cdot (P_1 - P_2)$$

$$D \propto \frac{\text{Sol}}{\sqrt{\text{MW}}}$$



Diffusion coefficient



*Diffusion coefficient $\propto \frac{\text{Solubility of the gas}}{\sqrt{\text{MW of the gas}}}$

Diffusion coefficient is directly proportional to solubility of the gas, and inversely proportional to the square root of gas's molecular weight (MW).

• **Diffusion coefficient for CO₂ is 20 times that of O₂;**

CO₂ is 24 times more soluble than O₂ is, but the MW of CO₂ is 1.4 times greater than that of O₂.

■ In lung diseases that impairs diffusion, **O₂ diffusion is more seriously impaired** than CO₂ diffusion because of the greater CO₂ diffusion coefficient.



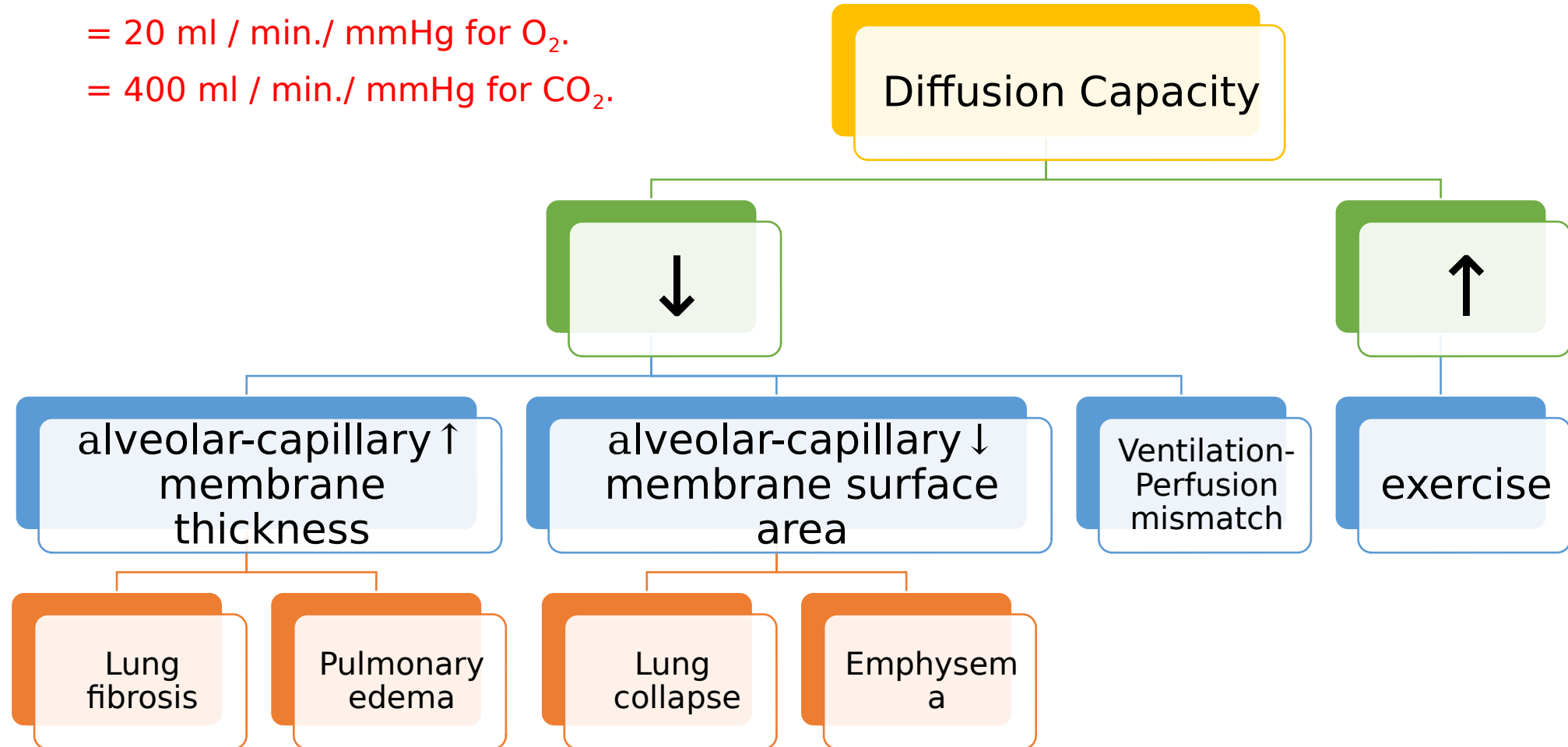
The diffusion capacity of the respiratory membrane



- **Definition:** The volume of gas that diffuses across the alveolar-capillary membrane / min for a pressure difference of 1 mmHg.

= 20 ml / min./ mmHg for O₂.

= 400 ml / min./ mmHg for CO₂.



Types of Gas Exchange:



Diffusion-Limited Gas Exchange

applies to CO

Perfusion-Limited Gas Exchange

applies to N₂O



Types of Gas Exchange:

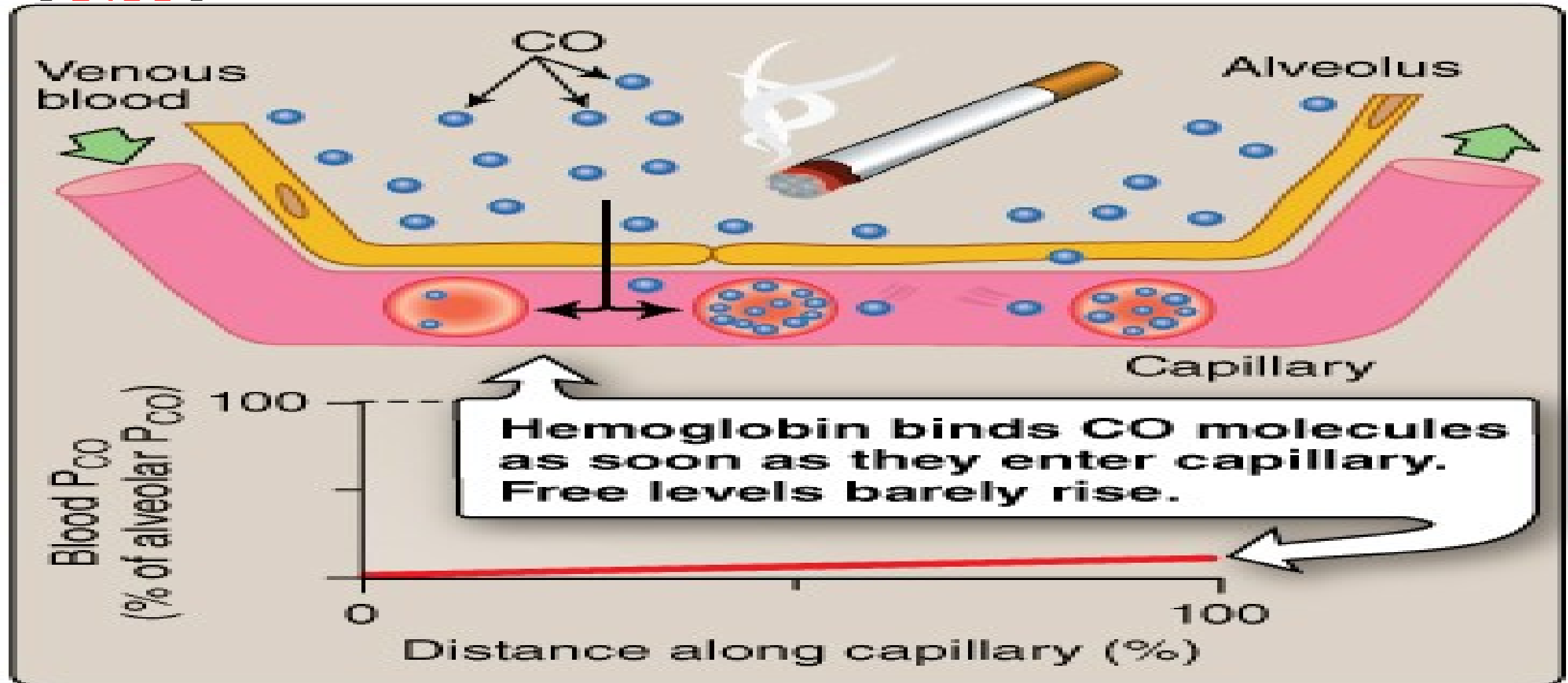


N.B:

- The physically dissolved form of the gas is the form that determine its partial pressure.
- Net diffusion into pulmonary capillary depends on magnitude of partial pressure gradient.
- **Whether a gas reaching equilibrium or not depends on its reaction with substances in the blood.**
 - **0.75 sec is the time the blood takes to traverse the pulmonary capillaries at rest.**



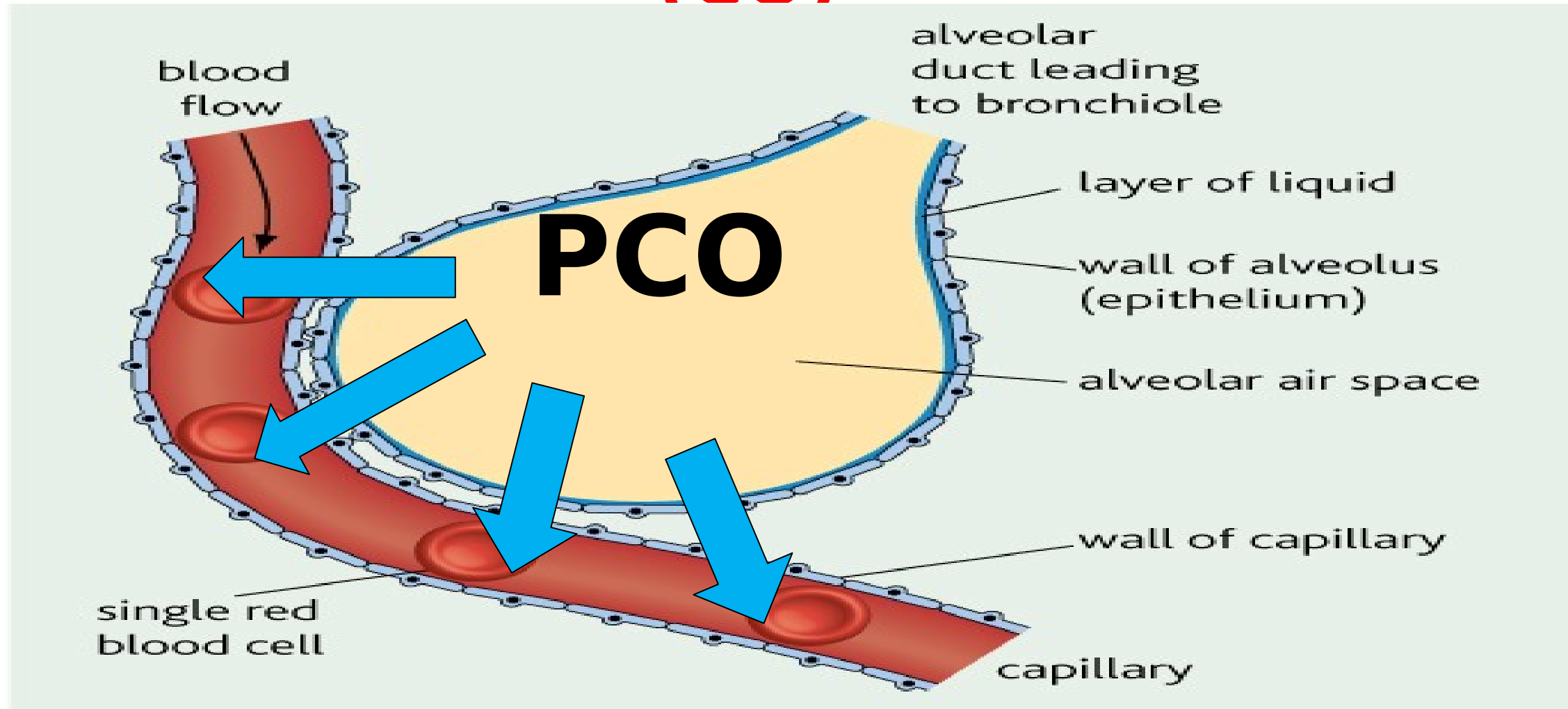
Diffusion-Limited Gas Exchange (CO)



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Diffusion-Limited Gas Exchange (CO)



CO does not equilibrate by end of capillary

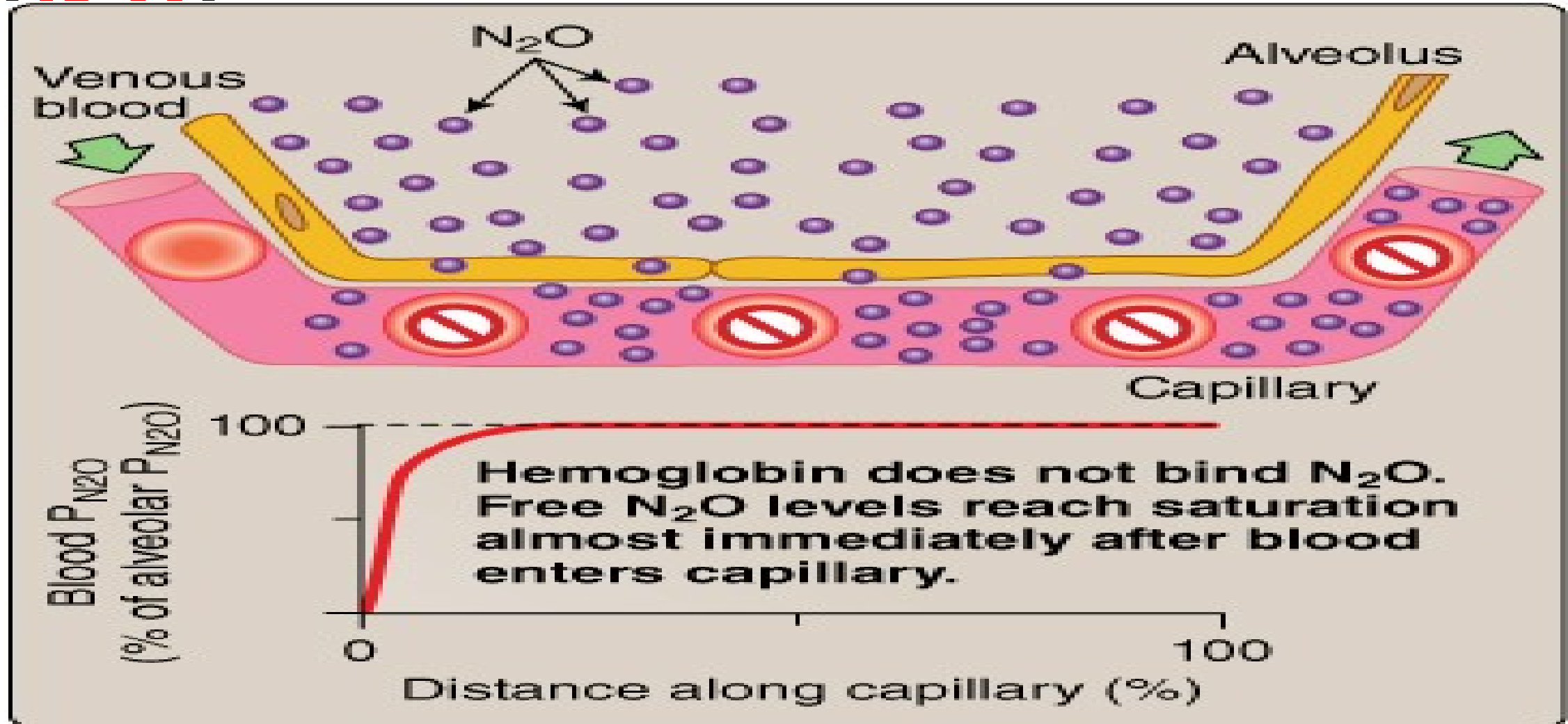
<https://y12hb.wordpress.com/2013/04/07/the-lungs/>



Perfusion-Limited Gas Exchange



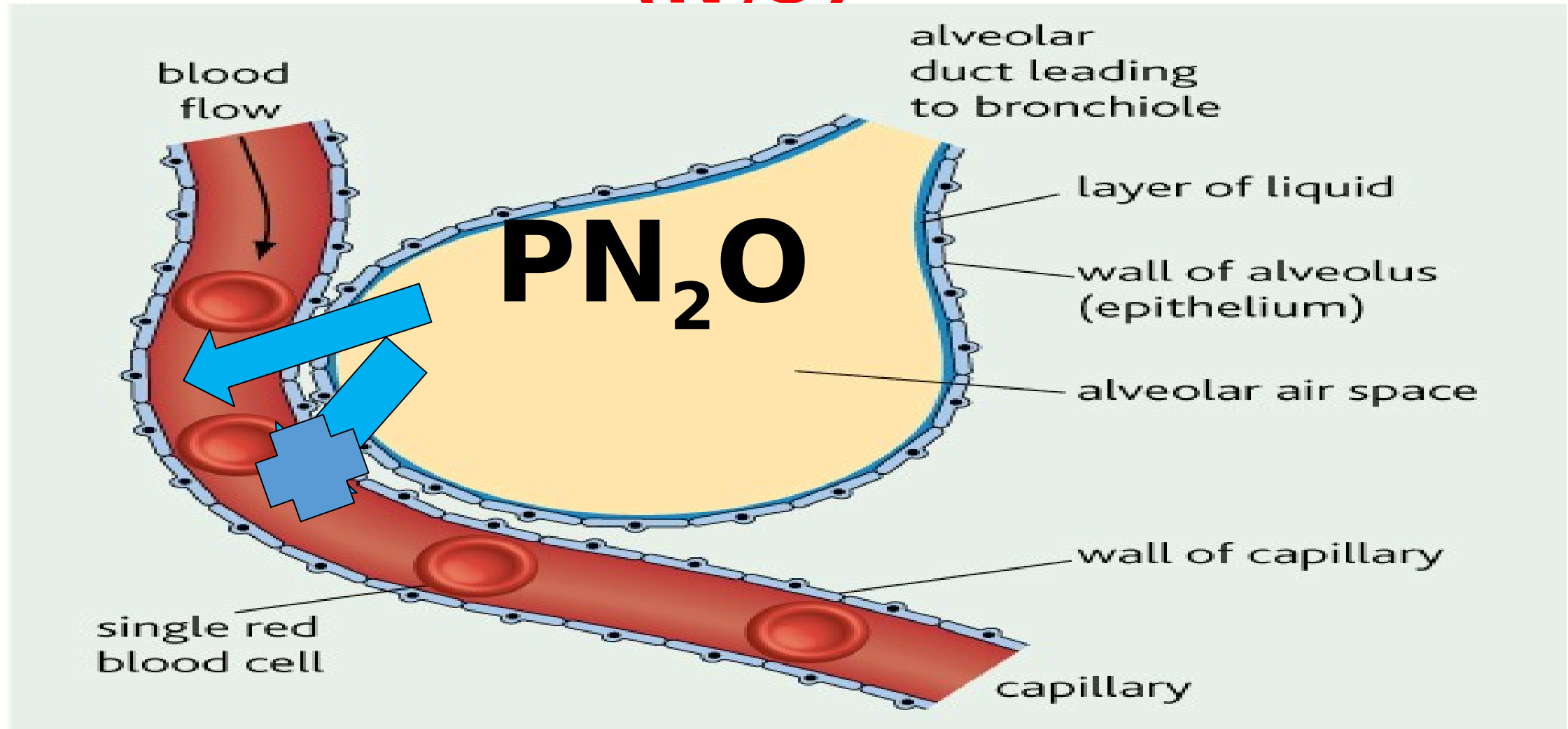
(**N** **O**)



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Perfusion-Limited Gas Exchange (N_2O)



N_2O equilibrates early along length of capillary reaches equilibrium in about 0.1 s

<https://y12hb.wordpress.com/2013/04/07/the-lungs/>

Cardio-pulmonary Module



Gas Exchange (O_2)

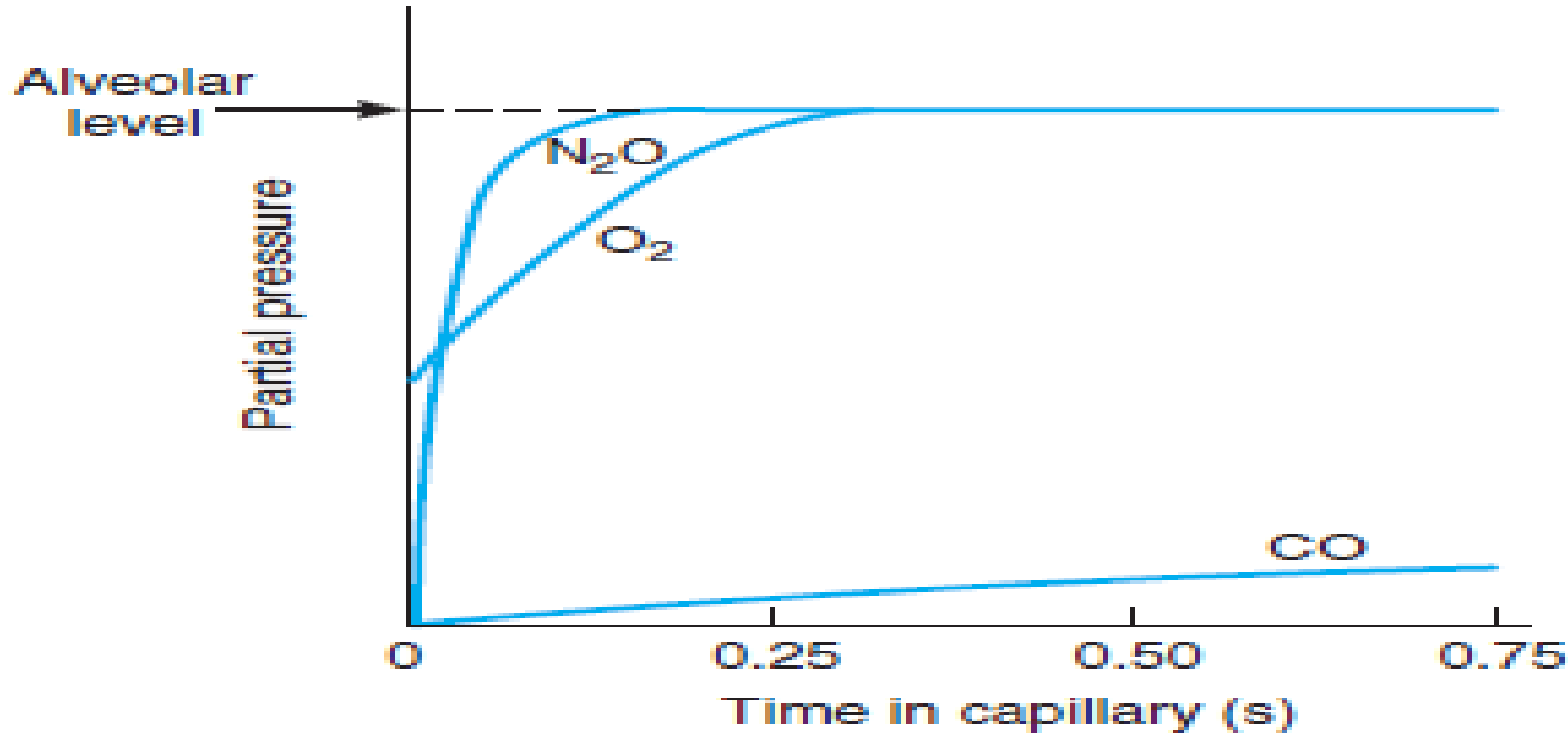


O_2 is intermediate between N_2O and CO ; it is taken up by hemoglobin, but much less avidly than CO , and it reaches equilibrium with capillary blood in about **0.3 sec.**

Thus, its uptake is **perfusion-limited.**



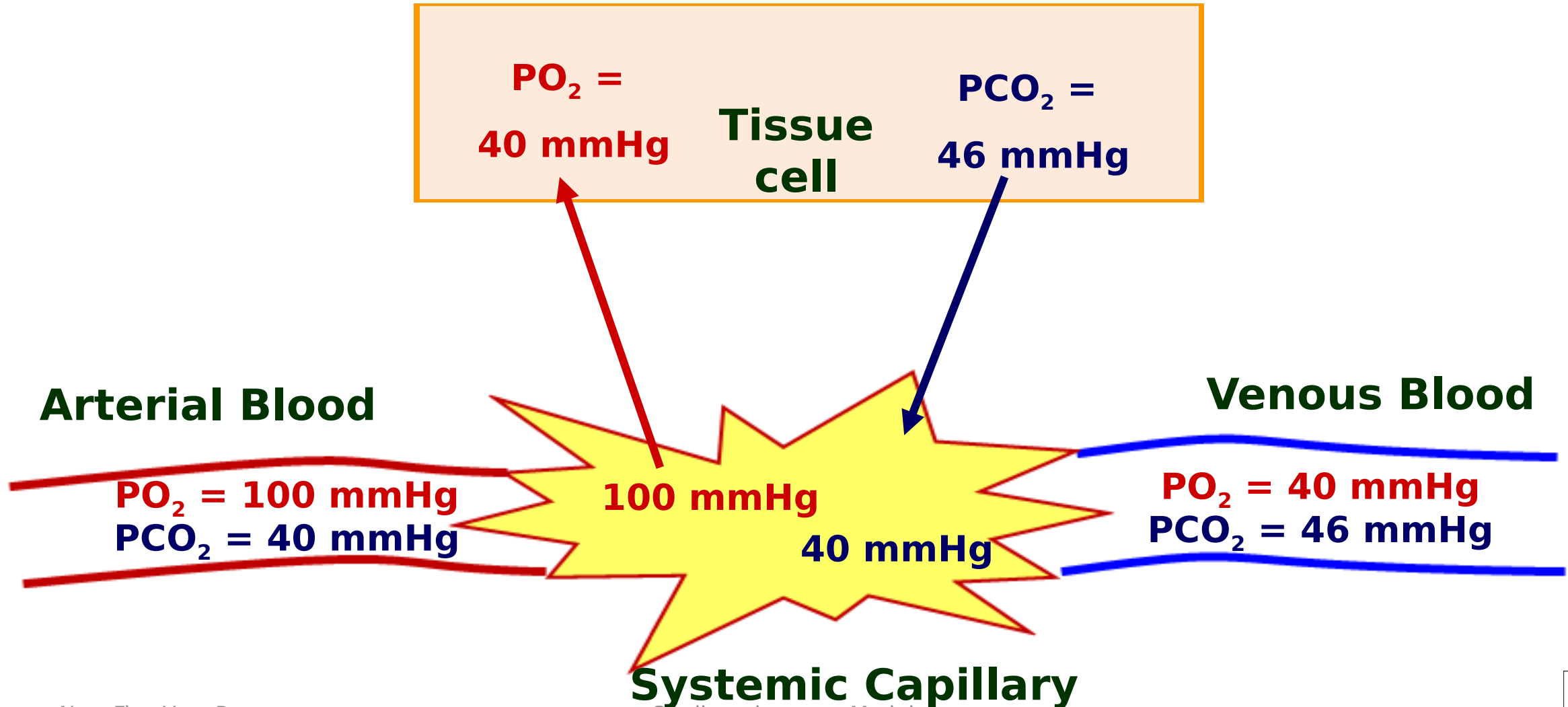
Gas Exchange (CO , N_2O , O_2)



- N_2O is not bound in blood, so its partial pressure in blood rises rapidly to its partial pressure in the alveoli.
 - Conversely, CO is avidly taken up by red blood cells, so its partial pressure reaches only a fraction of its partial pressure in the alveoli.
 - O_2 is intermediate between the two.
- Ganong 25th ed.



Gas Exchange At Tissue Level



Lecture Quiz



1. Define *partial pressure of gas*.
2. What determines the partial pressures of a gas?
3. Make a sketch showing the PO_2 and PCO_2 gradients and the direction of O_2 and CO_2 movement between the alveoli and pulmonary capillaries and between the tissue cells and systemic capillaries.



SUGGESTED TEXTBOOKS



1. Ganong's review of medical physiology 25th edition

2. Lippincott's illustrated reviews: Physiology

3. BRS Physiology 6th ed.

